

FORM PTO-875 (REV. 1-86)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		SERIAL NO. <i>020 477 8</i>	FILING DATE <i>32-87</i>
PATENT APPLICATION FEE DETERMINATION RECORD				APPLICANT (FIRST NAMED) <i>Ole K. Nilsen</i>	

CLAIMS AS FILED - PART I

FOR:		NO. FILED	NO. EXTRA	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
BASIC FEE				RATE	Fee	RATE	Fee
TOTAL CLAIMS		<i>3</i>	-20..	X6..	<i>\$ 0</i>	OR	
INDEP. CLAIMS		<i>4</i>	-3..	X17..	<i>\$ 13</i>	OR	
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT				X55..	<i>\$ 0</i>	OR	
				X110..	<i>\$ 0</i>	OR	
				TOTAL	<i>\$ 187</i>	TOTAL	<i>\$ 0</i>

* If the difference in col. 1 is less than zero, enter "0" in col. 2

CLAIMS AS AMENDED - PART II

AMENDMENT (A)	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	MINUS	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE
TOTAL	<i>14</i>	<i>20</i>	<i>14</i>	<i>14</i>	<i>20</i>	<i>4</i>	×5..	<i>\$ 0</i>	×10..	<i>\$ 0</i>
INDEP.	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	×15..	<i>\$ 0</i>	×30..	<i>\$ 0</i>
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							+50..	<i>\$ 0</i>	+100..	<i>\$ 0</i>
							TOTAL ADDIT. FEE	<i>\$ 0</i>	TOTAL	<i>\$ 0</i>

AMENDMENT (B)	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	MINUS	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE
TOTAL	<i>15</i>	<i>20</i>	<i>15</i>	<i>15</i>	<i>20</i>	<i>5</i>	×5..	<i>\$ 0</i>	×10..	<i>\$ 0</i>
INDEP.	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	×15..	<i>\$ 0</i>	×30..	<i>\$ 0</i>
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							+50..	<i>\$ 0</i>	+100..	<i>\$ 0</i>
							TOTAL ADDIT. FEE	<i>\$ 0</i>	TOTAL	<i>\$ 0</i>

AMENDMENT (C)	(1)		(2)		(3)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	MINUS	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE
TOTAL	<i>21</i>	<i>20</i>	<i>21</i>	<i>21</i>	<i>20</i>	<i>1</i>	6x6..	<i>\$ 6.00</i>	×10..	<i>\$ 0</i>
INDEP.	<i>7</i>	<i>4</i>	<i>7</i>	<i>7</i>	<i>4</i>	<i>3</i>	18x6..	<i>\$ 51.00</i>	×30..	<i>\$ 0</i>
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							+50..	<i>\$ 0</i>	+100..	<i>\$ 0</i>
							TOTAL ADDIT. FEE	<i>\$ 57.00</i>	TOTAL	<i>\$ 0</i>

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1.